

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Aaron Abadi		COURT CASE NUMBER 23cv4033
DEFENDANT American Airlines Group Inc, et al		TYPE OF PROCESS Summons & Complaint
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN US DEPARTMENT OF HEALTH & HUMAN SERVICES	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 200 INDEPENDENCE AVENUE, S.W. WASHINGTON, D.C. 20201	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Aaron Abadi 82 Nassau Street Apt. 140 New York, NY 10038		Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of: <i>T. Arora</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 9/5/2023
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## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 56/57	District of Origin No. 054	District to Serve No. A16	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 11/9/2023
I hereby certify and return that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.					
<input checked="" type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)					
Name and title of individual served (if not shown above)				Date 11/28/2023	Time 10:00
Address (complete only different than shown above)				Signature of U.S. Marshal or Deputy <i>[Signature]</i> 3216	

Costs shown on attached USMS Cost Sheet >>

### REMARKS

11/22/23: Attempted service and was refused by security personnel and given no alternative to serve process.

11/24/23: Called and left a voicemail for the OGC office for Health and Human Services to determine if there was an alternative to serve.

11/28/23: Attempted service again and was refused. Will return unexecuted.

Deputy was not able to serve process, but the summons & complaint was sent by Fedex and delivery was confirmed.

SERVED BY CERTIFIED MAIL  
 RECEIPT # 773694870724 (Dept. of Health)  
 RECEIPT # 773694911625 (U.S. AG)  
 DATE MAILED 10/10/2023

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 23cv4033

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) US Department of Health & Human Service  
 was received by me on (date) 11/9/2023.

☐ I personally served the summons on the individual at (place) \_\_\_\_\_  
 on (date) \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with (name) \_\_\_\_\_  
 \_\_\_\_\_, a person of suitable age and discretion who resides there,  
 on (date) \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) \_\_\_\_\_, who is  
 designated by law to accept service of process on behalf of (name of organization)  
 \_\_\_\_\_ on (date) \_\_\_\_\_; or

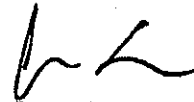
☒ I returned the summons unexecuted because unable to locate; or

☐ Other (specify): \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date:

11/29/23

Server's signature

CEstrada, D USM  
 Printed name and title

333 Constitution Ave NW, Washington, DC  
 Server's address  
20001

Additional information regarding attempted service, etc:



November 28, 2023

Dear Customer,

The following is the proof-of-delivery for tracking number: 773694870724

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**Delivery Information:**

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<b>Status:</b>	Delivered	<b>Delivered To:</b>	Mailroom
<b>Signed for by:</b>	P.ZEIDMAN	<b>Delivery Location:</b>	
<b>Service type:</b>	FedEx Standard Overnight		
<b>Special Handling:</b>	Deliver Weekday		WASHINGTON, DC,
		<b>Delivery date:</b>	Oct 12, 2023 11:33

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**Shipping Information:**

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<b>Tracking number:</b>	773694870724	<b>Ship Date:</b>	Oct 11, 2023
		<b>Weight:</b>	5.0 LB/2.27 KG
<b>Recipient:</b>		<b>Shipper:</b>	
WASHINGTON, DC, US,		New York, NY, US,	

FedEx Express proof-of-delivery details appear below; however, no signature is currently available for this shipment. Please check again later for a signature.